## Case 16-80418 Doc 1 Filed 02/24/16 Entered 02/24/16 13:09:59 Desc Main Document Page 1 of 56

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

B 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Randy	
	your government-issued picture identification (for example, your driver's license or passport).	First name	First name
		L.	
		Middle name	Middle name
	Bring your picture identification to your	Webster	
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	•	
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5628	

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Debtor 1 Randy L. Webster

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs		
5.	Where you live	4125 Florida Drive, Apt. 114	If Debtor 2 lives at a different address:		
		Rockford, IL 61108  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Winnebago	County		
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	<ul> <li>Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> </ul>		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Case number (if known) Debtor 1 Randy L. Webster

Par	t 2: Tell the Court About	Your B	Bankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	<b>■</b> C	Chapter 7					
		□с	Chapter 11					
		□с	Chapter 12					
			Chapter 13					
3.	How you will pay the fee	•	about how yo order. If your	I will pay the entire fee when I file my petition. Please check with the clerk's office in your loca about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cas order. If your attorney is submitting your payment on your behalf, your attorney may pay with a creat pre-printed address.				
					stallments. If you choose this op ts (Official Form 103A).	tion, sign and attach the Application for Individual	s to Pay	
			but is not req that applies to	uired to, waive by your family si	your fee, and may do so only if y ze and you are unable to pay the	on only if you are filing for Chapter 7. By law, a juryour income is less than 150% of the official pover fee in installments). If you choose this option, yo (Official Form 103B) and file it with your petition.	rty line	
<b>.</b>	Have you filed for	■ No	0					
	bankruptcy within the last 8 years?	— 1 <b>1</b> 0						
	iasi o years:	<b>□</b> 16	District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10	Are any bankruptcy							
10.	cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Y€	es.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?		o. Go to I	ine 12.				
	residence:	■ Ye	es. Has yo	ur landlord obta	ained an eviction judgment agair	st you and do you want to stay in your residence	?	
			•	No. Go to line	12.			
				Yes. Fill out Inbankruptcy pe		n Judgment Against You (Form 101A) and file it w	ith this	

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Desc Main Document Page 4 of 56 Case number (if known) Debtor 1 Randy L. Webster Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation. partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. ■ No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). Code.

#### Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No.

☐ Yes.

Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

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Debtor 1 Randy L. Webster

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental deficiency that makes

me incapable of realizing or making rational decisions

about finances.

☐ **Disability.** My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a	briefing about	credit
counseling because of:		

I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 Randy L. Webster Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative Yes. after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 **1**-49 you estimate that you **5**0,001-100,000 **5001-10,000** □ 50-99 owe? **1**0,001-25,000 ■ More than 100,000 □ 100-199 **200-999** How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50,000 estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10.000.000.001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Randy L. Webster Signature of Debtor 2 Randy L. Webster Signature of Debtor 1 Executed on February 24, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Randy L. Webster Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel	A. Springer	Date	February 24, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Daniel A. S	Springer		
Springer L	aw Firm		
Firm name			
2222 E Sta	ite St		
Suite 107			
Rockford,	IL 61104		
Number, Street,	City, State & ZIP Code		
Contact phone	815.312.4725	Email address	dspringerlaw@gmail.com
6314059			
Bar number & St	rate		

		Docume	<u>eni Pade 8 0150</u>	)	
Fill in this infor	mation to identify your	case:			
Debtor 1	Randy L. Webste	r			
	First Name	Middle Name	Last Name		
Debtor 2					
Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
if known)					Check if this is an
					amended filing

### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	12,377.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	12,377.00
Par	2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	20,971.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	44,836.00
	Your total liabilities	\$	65,807.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,343.46
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,307.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	our other so	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	o noroonal	family or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Case number (if known) Debtor 1 Randy L. Webster

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.	ŀ

3,277.96

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Tota	l claim
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	s 	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Case 16-80418 Doc 1 Filed 02/24/16 Entered 02/24/16 13:09:59 Desc Main Document Page 10 of 56 Fill in this information to identify your case and this filing: Debtor 1 Randy L. Webster Middle Name Last Name First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Kia 3 1 Make: Who has an interest in the property? Check one. the amount of any secured claims on Schedule D: **Forte** Model<sup>3</sup> Debtor 1 only Creditors Who Have Claims Secured by Property. Year: 2015 Debtor 2 only Current value of the Current value of the Approximate mileage: 6,000 Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$10,850.00 \$10,850.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$10.850.00 pages you have attached for Part 2. Write that number here.....=>

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

_		Case 16-		Doc 1	Filed 02/24/16 Document	Page 11 of 56		Desc Main
De	ebtor 1	Randy L. W	ebster			Case numbe	r (if known)	
	■ Yes.	Describe	Queen	Bed, Couc	h			\$300.00
7.	Electror Exampl  No	les: Televisions a			stereo, and digital equi dia players, games	pment; computers, printers, scanne	ers; music	collections; electronic devices
	Yes.	Describe	TV					\$100.00
8.	<i>Exampl</i> ☐ No			paintings, pri orabilia, colled		ooks, pictures, or other art objects;	stamp, coiı	n, or baseball card collections;
	<b>—</b> 165.	Describe	Photo (	Collection				\$25.00
9.	Exampl  No	ent for sports a les: Sports, photo musical insti	ographic, e		other hobby equipment;	bicycles, pool tables, golf clubs, sk	xis; canoes	and kayaks; carpentry tools;
	■ No		es, shotgun	s, ammunitio	n, and related equipmer	nt		
11.	□ No ·		lothes, furs	, leather coat	s, designer wear, shoes	s, accessories		
	■ Yes.	Describe	Used C	lothing				\$40.00
	■ No □ Yes.	oles: Everyday je	ewelry, cost	tume jewelry,	engagement rings, wed	dding rings, heirloom jewelry, watch	es, gems,	gold, silver
13.	Examp ■ No	urm animals  bles: Dogs, cats,  Describe	birds, hors	ses				
14.	■ No	her personal ar			u did not already list, i	including any health aids you did	I not list	
15					rom Part 3, including a	any entries for pages you have at	tached	\$465.00
		scribe Your Finan						
De	you ov	vn or have any	legal or eq	uitable inter	est in any of the follow	ving?		Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B

Schedule A/B: Property

De	ebtor 1	Randy L. We	bster		Document	Page 12 of 56 Case number (if known)	
16.	□ No ´	,,	•	our wallet, in your h	,	posit box, and on hand when you file your petition	
						Cash	\$20.00
17.	Example No			or other financial aco ave multiple accoun		,	ses, and other similar
			17.1.	Checking	German	American State Bank	<b>\$50.00</b>
			17.2.	Savings	German	American State Bank	\$0.00
18.	Example ■ No			cly traded stocks ent accounts with b	Ç .	oney market accounts	
19.	Non-pu		ock and	interests in incorp	porated and unin	corporated businesses, including an interest in	an LLC, partnership,
	☐ Yes.	Give specific inf		about them me of entity:		% of ownership:	
20.	Negotia Non-ne ■ No	ble instruments	include ents are	personal checks, ca those you cannot to	ashiers' checks, pr	negotiable instruments omissory notes, and money orders. e by signing or delivering them.	
		opodino ime		uer name:			
21.		ent or pension les: Interests in			403(b), thrift savir	ngs accounts, or other pension or profit-sharing plan	ns
	☐ Yes. L	ist each accour		tely. of account:	Institution	name:	
22.	Your sh		d deposi	ts you have made s		ontinue service or use from a company ectric, gas, water), telecommunications companies	, or others
			Dani			name or individual:	¢c25.00
			Rent			perty Management  nwealth Edison	\$625.00 \$185.00
23.	Annuitie	•	or a perio	dic payment of mor		or life or for a number of years)	\$100.00
	☐ Yes	•••••		ne and description.			
24.	26 U.S.C ■ No	c. §§ 530(b)(1), s	529A(b),	and 529(b)(1).		rogram, or under a qualified state tuition progra	ım.
	☐ Yes	In:	stitution	name and description	on. Separately file	the records of any interests.11 U.S.C. § 521(c):	

Official Form 106A/B

De	btor 1	Randy L	Webster	Document	Page 13 of $56_{\rm C}$	ase number (if known)	
25.	Trusts,			property (other than anythi	ng listed in line 1), and	rights or powers exerci	sable for your benefit
	■ No						
	☐ Yes.	Give specif	fic information about the	nem			
	Ехатр			e secrets, and other intellect sites, proceeds from royalties		ts	
	■ No	0					
	⊔ Yes.	Give specif	fic information about the	nem			
			ses, and other gener g permits, exclusive lid	al intangibles censes, cooperative association	on holdings, liquor licens	es, professional licenses	
		Give specif	fic information about the	hem			
Mc	oney or p	property ov	wed to you?				Current value of the portion you own?  Do not deduct secured claims or exemptions.
	Tax ref □ No	unds owed	i to you				
	Yes.	Give specifi	ic information about th	em, including whether you alr	eady filed the returns an	d the tax years	
				2015 Tax Refund		State	\$182.00
30.	Other a Examp  ■ No	amounts so bles: Unpaid benefit	ic information   prepare owes you  I wages, disability insu  is; unpaid loans you m  fic information	erance payments, disability be lade to someone else	nefits, sick pay, vacation	pay, workers' compensa	ition, Social Security
	_Ехатр		ance policies , disability, or life insur	ance; health savings account	(HSA); credit, homeown	er's, or renter's insurance	
	□ No ■ v		,	1 2 12 45			
	■ Yes.	Name the ir	nsurance company of Company r	each policy and list its value. name:	Beneficiary	<i>/</i> :	Surrender or refund
			Current E	mplover	Christine	Webster	value: <b>\$0.00</b>
	If you a someon	are the bene ne has died	eficiary of a living trust	u from someone who has di , expect proceeds from a life i		currently entitled to receive	e property because
				or not you have filed a laws utes, insurance claims, or righ		or payment	
		Describe e	ach claim				
	Other o	contingent	and unliquidated cla	ims of every nature, includi	ng counterclaims of th	e debtor and rights to se	et off claims
	_	Describe e	ach claim				
35	Any fin	ancial asse	ets vou did not alrea	dv list			

Schedule A/B: Property

Official Form 106A/B

		Case 16-80418	Doc 1	Filed 02/24/16 Document	Entered 0 Page 14 of	2/24/16 13:09:59 56	Desc Main
Debt	or 1	Randy L. Webster				Case number (if known)	
	l Yes.	Give specific information					
		the dollar value of all of yo art 4. Write that number ho					\$1,062.00
Part 5	De	scribe Any Business-Related	Property You	Own or Have an Interest I	n. List any real estat	e in Part 1.	
_	-	own or have any legal or equita	able interest in	n any business-related pro	operty?		
_		3 to Part 6. 30 to line 38.					
	165. (	30 to line 36.					
Part 6		scribe Any Farm- and Comme ou own or have an interest in far			n or Have an Interest	ln.	
_	_ `	ı own or have any legal or	equitable in	nterest in any farm- or	commercial fishi	ng-related property?	
_		Go to Part 7.					
	⊔ Yes	. Go to line 47.					
							Current value of the portion you own? Do not deduct secured claims or exemptions.
Part 7	7: De	scribe All Property You Own o	or Have an Inte	erest in That You Did Not	List Above		
		u have other property of an oles: Season tickets, country					
	Yes.	Give specific information					
54.	Add t	the dollar value of all of yo	our entries f	rom Part 7. Write that	number here		\$0.00
Part 8	B: Lis	st the Totals of Each Part of thi	is Form				
55.	Part '	1: Total real estate, line 2					\$0.00
56.	Part 2	2: Total vehicles, line 5			\$10,850.00		
		3: Total personal and hous		s, line 15	\$465.00		
		4: Total financial assets, li			\$1,062.00		
59.	Part :	5: Total business-related p	property, iin	e 45	\$0.00		
60.	Part (	6: Total farm- and fishing-	related prop	perty, line 52	\$0.00		
61.	Part 7	7: Total other property not	t listed, line	54 +	\$0.00		
62.	Total	personal property. Add lin	nes 56 throug	gh 61	\$12,377.00	Copy personal property to	otal <b>\$12,377.00</b>
63.	Total	of all property on Schedu	ıle A/B. Add	line 55 + line 62			\$12,377.00

Official Form 106A/B Schedule A/B: Property page 5

Fill in this infor	mation to identify your	case:		
Debtor 1	Randy L. Webste	r		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is a amended filing

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim  Check only one box for each exemption.		Specific laws that allow exemption
	Copy the value from Schedule A/B			
2015 Kia Forte 6,000 miles Line from Schedule A/B: 3.1	\$10,850.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line Horr Schedule A.B. V.1			100% of fair market value, up to any applicable statutory limit	
Queen Bed, Couch Line from Schedule A/B: 6.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
Line Hoff Schedule A.B. V.1			100% of fair market value, up to any applicable statutory limit	
TV Line from Schedule A/B: 7.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
Line Horr Schedule Arb. 1.1			100% of fair market value, up to any applicable statutory limit	
Photo Collection Line from Schedule A/B: 8.1	\$25.00		\$25.00	735 ILCS 5/12-1001(a)
Line Hoff Schedule A/B. V.1			100% of fair market value, up to any applicable statutory limit	
Used Clothing Line from Schedule A/B: 11.1	\$40.00		\$40.00	735 ILCS 5/12-1001(a)
Line nom Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	

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Case number (if known)

	ef description of the property and line on hedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	esh e from <i>Schedule A/B</i> : <b>16.1</b>	\$20.00		\$20.00	735 ILCS 5/12-1001(b)
LIII	e nom <i>Schedule Alb.</i> 10.1			100% of fair market value, up to any applicable statutory limit	
	necking: German American State	\$50.00		\$50.00	735 ILCS 5/12-1001(b)
Lin	e from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	ate: 2015 Tax Refund	\$182.00		\$182.00	735 ILCS 5/12-1001(b)
LIII	e Hom <i>Schedule AVB</i> . <b>20.1</b>			100% of fair market value, up to any applicable statutory limit	
	e you claiming a homestead exemption ubject to adjustment on 4/01/16 and every No				ent.)
	Yes. Did you acquire the property cover	red by the exemption w	ithin 1	,215 days before you filed this case	9?
	□ No				
	☐ Yes				

Cc	136 10-00410	Documer Documer		02124110 13.0 of 56	Ja.Ja Desciv	ιαπι
Fill in this infor	mation to identify you		TAUG 17	01.50		
Debtor 1	Randy L. Webst	Middle Name	Last Name			
Debtor 2	. not riamo	mado namo	<u> Luot i famo</u>			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the	: NORTHERN DISTRICT C	OF ILLINOIS			
Case number _					Charle	: if th: - :
(ii Kilowii)						if this is an ded filing
						3
Official Forr	<u>n 106D</u>					
Schedule	D: Creditors	Who Have Clair	ns Secured	by Property	y	12/15
Be as complete and	d accurate as possible. I	f two married people are filing to	gether, both are equall	v responsible for supr	olving correct information	on. If more space is
needed, copy the A		, number the entries, and attach				
known).	harra alabara a a a constitui					
	have claims secured by					
□ No. Checi	k this box and submit t	this form to the court with your	other schedules. You	u have nothing else	to report on this form.	
Yes. Fill in	n all of the information	below.				
Part 1: List A	II Secured Claims					
2. List all secured	claims. If a creditor has n	nore than one secured claim, list th	e creditor separately for	Column A	Column B	Column C
		particular claim, list the other creditor ler according to the creditor's name		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Exeter Fi	nance	Describe the property that sec	ures the claim:	\$20,971.00	\$10,850.00	\$10,121.00
Creditor's Nam	ne	2015 Kia Forte 6,000 mi	les			
	kruptcy Dept.	As of the date you file, the clai	m is: Check all that			
PO Box 1		apply.				
	75016-6097	☐ Contingent				
Number, Street	t, City, State & Zip Code	Unliquidated				
Who owes the de	aht? Chaak ana	Disputed				
_	ebt? Check one.	Nature of lien. Check all that a				
Debtor 1 only		An agreement you made (succer loan)	ch as mortgage or secure	ed		
Debtor 2 only		_ ′				
Debtor 1 and De		☐ Statutory lien (such as tax lie	n, mechanic's lien)			
_	he debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this cl community de		☐ Other (including a right to offs				
Data dabt in a		1 4 -li-it 6				
Date debt was inc	urred <u>7/2015</u>	Last 4 digits of account	number			
Add the dollar va	alue of vour entries in Co	olumn A on this page. Write that	number here:	\$20,97	1.00	
	=	the dollar value totals from all pa				
Write that numb		·	-	\$20,97	1.00	
Part 2: List Ot	hers to Be Notified fo	or a Debt That You Already L	isted			
		e notified about your bankruptcy		adv listed in Part 1 Fo	or example, if a collection	n agency is trying
		someone else, list the creditor in				
		d in Part 1, list the additional cred	ditors here. If you do no	ot have additional pers	ons to be notified for ar	y debts in Part 1,
do not fill out or se						
-NONE-	200		On which line	in Part 1 did vou	enter the creditor?	>
.10.11				-		· 
			Last 4 digits of	f account numbe	r	

Official Form 106D

		Document	Page 18 of 56		
Fill in this	information to identify your	case:			
Debtor 1	Randy L. Webster	•			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	g) First Name	Middle Name	Last Name		
	<b>3</b> /				
United Stat	es Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS		
Case numb	per				
(if known)					this is an
				amended	d filing
Official	Form 106E/F				
	ule E/F: Creditors	Who Have Unsec	ured Claims		12/15
			ITY claims and Part 2 for creditors with NONPRIO	RITY claims. List th	
ny executor Schedule G: D: Creditors	y contracts or unexpired leases t Executory Contracts and Unexpi Who Have Claims Secured by Protion Page to this page. If you hav	hat could result in a claim. Also red Leases (Official Form 106G). operty. If more space is needed,	b list executory contracts on Schedule A/B: Proper. Do not include any creditors with partially secure copy the Part you need, fill it out, number the entrart, do not file that Part. On the top of any addition	rty (Official Form 10 ed claims that are listing ries in the boxes on	06A/B) and on sted in Schedule on the left. Attach
Part 1:	List All of Your PRIORITY Un	secured Claims			
1. Do a	ny creditors have priority unsecu	red claims against you?			
■ N	o. Go to Part 2.				
□ Y	es.				
	List All of Your NONPRIORIT	Y Unsecured Claims			
3. Do a	ny creditors have nonpriority uns	secured claims against you?			
□N	o. You have nothing to report in this	s part. Submit this form to the cour	t with your other schedules.		
<b>■</b> Y	es.				
unse	cured claim, list the creditor separa one creditor holds a particular clain	tely for each claim. For each claim	of the creditor who holds each claim. If a creditor I listed, identify what type of claim it is. Do not list clain f you have more than three nonpriority unsecured clair	ns already included i	in Part 1. If more
				Total	laim
	&T	Last 4 digits of acc	ount number	\$	300.00
PC	priority Creditor's Name  Box 6416  rol Stream, IL 60197	When was the debt	t incurred?	_	
	mber Street City State Zlp Code	As of the date you	file, the claim is: Check all that apply		
Wh	o incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	<u> </u>			
	Debtor 2 only	☐ Unliquidated			
П	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and and		RITY unsecured claim:		
	Check if this claim is for a comn	<u>_</u>			
ls ti	he claim subject to offset?		ng out of a separation agreement or divorce that you	did	
_		not report as priority	n or profit-sharing plans, and other similar debts		
_		Debts to pension			
	Yes	Other. Specify	Utilities		
	&T Wireless	Last 4 digits of acc	count number	\$	500.00
Att 79	priority Creditor's Name tn: Bankruptcy Dept. 00 Xerxes Ave, S Ste 301 nneapolis, MN 55431	When was the deb	t incurred?		

As of the date you file, the claim is: Check all that apply

Number Street City State Zlp Code

	1711 Broadway Rockford, IL 61104 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only	As of the date you file, the claim is: Check all that apply  Contingent		
	1711 Broadway Rockford, IL 61104 Number Street City State Zlp Code Who incurred the debt? Check one.	_		
	1711 Broadway Rockford, IL 61104 Number Street City State Zlp Code	_		
	1711 Broadway Rockford, IL 61104	As of the date you file, the claim is: Check all that apply		
	Attn: Bankruptcy Dept.	When was the debt incurred?		
4.4	Chase 8 Auto Sales Nonpriority Creditor's Name	Last 4 digits of account number	\$	2,500.00
	Yes	■ Other. Specify Medical Bills		
	No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	☐ Check if this claim is for a community debt	☐ Student loans		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 only	- Conungent		
	Who incurred the debt? Check one.	☐ Contingent		
	300 East Randolph Street Chicago, IL 60601  Number Street City State Zlp Code	When was the debt incurred?  As of the date you file, the claim is: Check all that apply		
4.3	Blue Cross Blue Shield of Illinois  Nonpriority Creditor's Name	Last 4 digits of account number	\$	400.00
	☐ res	Other. Specify Utilities		
	■ No □ Yes			
	_	not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did		
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Type of NONPRIORITY unsecured claim:   Student loans		
	Debtor 1 and Debtor 2 only	Disputed		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 only	-		
	Who incurred the debt? Check one.	□ Contingent		
Debtor	1 Randy L. Webster	Document Page 19 of 56 Case number (if know)		
	Case 16-80418 Doc 1	Filed 02/24/16 Entered 02/24/16 13:09:59	Desc Main	

Rockford, IL 61108

Debto	Case 16-80418 Doc 1	Filed 02/24/16 Entered 02/24/16 13:09:59  Document Page 20 of 56  Case number (if know)	Desc Main	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	- Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Personal Loan		
4.6	City of Rockford EAS Ambulance			
	Svc.	Last 4 digits of account number	\$	679.00
	Nonpriority Creditor's Name 204 S. 1st Street Rockford, IL 61104	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Medical Services		
4.7	Consumer Cellular	Last 4 digits of account number	\$	96.00
	Nonpriority Creditor's Name 7204 SW Durham Rd Portland, OR 97224	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	· · · · · · · · · · · · · · · · ·		
	☐ Debtor 2 only			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Utilities		
4.8	Crusader Clinic	Last / digits of account number	Ф	147.00

Nonpriority Creditor's Name

Case 16-80418 Doc 1 Filed 02/24/16 Entered 02/24/16 13:09:59 Desc Main Document Page 21 of 56 Case number (if know) Debtor 1 Randy L. Webster When was the debt incurred? Attn: Bankruptcy Dept. 1200 W. State St. Rockford, IL 61102 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Bills** Other. Specify 4.9 **DirecTV** 438.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 6550 Englewood, CO 80155-6550 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. □ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset?  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Utilities** Other, Specify 4.10 4,411.00 **Drive Now Acceptance** Last 4 digits of account number \$ Nonpriority Creditor's Name 777 Dundee Avenue When was the debt incurred? Dundee, IL 60118 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt

■ No
□ Yes

not report as priority claims

Other. Specify

☐ Obligations arising out of a separation agreement or divorce that you did

**Auto Deficiency** 

☐ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Deptoi	Randy L. Webster	Case number (if know)		
4.11	Figis	Last 4 digits of account number	\$	38.00
	Nonpriority Creditor's Name 3200 S Central Ave. Marshfield, WI 54449	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	<b>D</b>		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Credit Extension		
4.12	GEICO	Last 4 digits of account number	\$	63.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 9105	When was the debt incurred?		
	Macon, GA 31208-9105  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
		As of the date you me, the claim is. Oneck all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Insurance		
4.13	Illinois Community Credit Union	Last 4 digits of account number	\$	8,673.00
	Nonpriority Creditor's Name		·	
	Attn: Bankruptcy Dept. 508 W State St.	When was the debt incurred?		
	Sycamore, IL 60178			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		

Debtor	1 Randy L. Webster	Document Page 23 of 56 Case number (if know)	
	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Auto Deficiency	
4.14	Infinity Healthcare Physicians	Last 4 digits of account number	\$ 1,332.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 111 E Wisconsin Ave. Suite 2000 Milwaukee, WI 53202	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only		
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	
4.15	LTD Commodities	Last 4 digits of account number	\$ 272.00
	Nonpriority Creditor's Name PO Box 740	When was the debt incurred?	
	Deerfield, IL 60015  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only	•	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collecting for Creditor	
4.16	Nationwide Insurance	Last 4 digits of account number	\$ 148.00
	Nonpriority Creditor's Name One Nationwide Plaza Columbus, OH 43215	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	

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Case number (if know)

Debto	Randy L. Webster	Document	Case number (if know)		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORIT	Y unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt				
	Is the claim subject to offset?	not report as priority cla			
	No	☐ Debts to pension o	r profit-sharing plans, and other similar debts		
	Yes	Other. Specify	Insurance		
4.17	Nicor Gas	Last 4 digits of accou	ınt number	\$	750.00
	Nonpriority Creditor's Name	_		· <del></del>	
	P.O. Box 190 Aurora, IL 60507	When was the debt in	ncurred?		
	Number Street City State Zlp Code	As of the date you file	e, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	-			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORIT	Y unsecured claim:		
	$\square$ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	Obligations arising not report as priority cla	out of a separation agreement or divorce that you did aims		
	No	Debts to pension o	r profit-sharing plans, and other similar debts		
	Yes	Other. Specify	Utilities		
4.18	Rockford Health Physicians	Last 4 digits of accou	ınt number	\$	662.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 2300 N Rockton Ave.	When was the debt in	ncurred?		
	Rockford, IL 61103  Number Street City State Zlp Code	As of the date you file	e, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	· ·			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORIT	Y unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	Obligations arising	out of a separation agreement or divorce that you did aims		
	■ No	_ ' ' '	r profit-sharing plans, and other similar debts		
	Yes	Other. Specify	Medical Bills		
4.19	Rockford Health System	Last 4 digits of accou	unt number	\$	4,593.00
1 I		•			

Nonpriority Creditor's Name

Case 16-80418 Doc 1 Filed 02/24/16 Entered 02/24/16 13:09:59 Desc Main Document Page 25 of 56 Case number (if know) Debtor 1 Randy L. Webster When was the debt incurred? Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Bills** Other. Specify 4.20 **Rockford Radiology** 607.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 2400 N Rockton Ave Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? lacksquare Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Bills** Other, Specify 4.21 638.00 **Sprint** Last 4 digits of account number \$ Nonpriority Creditor's Name KSOPHT0101-Z4300 When was the debt incurred? 6391 Sprint Parkway Overland Park, KS 66251 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did

Official Form 106 E/F

■ No
□ Yes

Debts to pension or profit-sharing plans, and other similar debts

Utilities

not report as priority claims

Other. Specify

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Case number (if know) Debtor 1 Randy L. Webster 4.22 **Swedish American Health** 6,813.00 **System** Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 1401 East State Street Rockford, IL 61104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Bills** Other. Specify 4.23 T-Mobile Bankruptcy Team 400.00 Last 4 digits of account number \$ Nonpriority Creditor's Name PO Box 53410 When was the debt incurred? Bellevue, WA 98015-3410 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Utilities** Other. Specify 4.24 8,803.00 **Titan Rentals** Last 4 digits of account number \$ Nonpriority Creditor's Name

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818 Main Street

Lafayette, IN 47901 Number Street City State Zlp Code When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Debtor '	Randy L. Webster	Document	Page 27 of 56 Case number (if know)	
	Who incurred the debt? Check one.	☐ Contingent	· · · · · · · · · · · · · · · · · · ·	
	☐ Debtor 1 only	□ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY	unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	Obligations arising ou not report as priority claim	it of a separation agreement or divorce that you did	
	■ No	Debts to pension or p	rofit-sharing plans, and other similar debts	
	Yes	Other. Specify	Back Rent/Property Damage	_
4.25	University of Phoenix	Last 4 digits of account	number	\$ 573.00
	Nonpriority Creditor's Name 1625 W. Fountainhead Pkwy Tempe, AZ 85282-2371	When was the debt incu	urred?	
	Number Street City State Zlp Code	As of the date you file,	the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another			
	☐ Check if this claim is for a community debt			
	Is the claim subject to offset?			
	■ No	☐ Debts to pension or p	rofit-sharing plans, and other similar debts	
	Yes	Other. Specify	Fees	_
Part 3:	List Others to Be Notified About a D	eht That You Already Lis	tad	
5. Use thi trying t more t	s page only if you have others to be notified a to collect from you for a debt you owe to som	about your bankruptcy, for a neone else, list the original co I listed in Parts 1 or 2, list the	debt that you already listed in Parts 1 or 2. For example reditor in Parts 1 or 2, then list the collection agency he additional creditors here. If you do not have additional	re. Similarly, if you have
	and Address		t 1 or Part2 did you list the original creditor?	
	nts Receivable Management	Line 4.24 of (Check on	•	
	Bankruptcy Dept. I 2nd St. Unit 5		■ Part 2: Creditors with Nonpriority	Unsecured Claims
Mache	sney Park, IL 61115			
		Last 4 digits of accoun	nt number	
Comm Attn: E 245 Ma		On which entry in Par Line <u>4.14</u> of ( <i>Check on</i>	t 1 or Part2 did you list the original creditor? e):  Part 1: Creditors with Priority Uns Part 2: Creditors with Nonpriority	
ocrant	on, PA 18519	Last 4 digits of accoun	nt number	
Name :	and Address		t 1 or Part2 did you list the original creditor?	
Credit	Collection Services	Line 4.16 of (Check on		ecured Claims
	Bankruptcy Dept. x 9134		■ Part 2: Creditors with Nonpriority	Unsecured Claims
	am Heights, MA 02494			
		Last 4 digits of account	nt number	
	and Address ced Recovery Company	On which entry in Par Line <u>4.23</u> of ( <i>Check on</i>	t 1 or Part2 did you list the original creditor?	

Official Form 106 E/F

Case 16-80418 Doc 1  Debtor 1 Randy L. Webster	Filed 02/24/16 Entered 02/24/16 13:09:59 Desc Main Document Page 28 of 56 Case number (if know)
Attn: Bankruptcy Dept. PO Box 57547 Jacksonville, FL 32241	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Jacksonvine, i E 32241	Last 4 digits of account number
Name and Address Enhanced Recovery Company Attn: Bankruptcy Dept. PO Box 57547 Jacksonville, FL 32241	On which entry in Part 1 or Part2 did you list the original creditor?  Line 4.21 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
040K30HVIIIC, 1 E 32241	Last 4 digits of account number
Name and Address Equifax PO Box 740256 Atlanta, GA 30374	On which entry in Part 1 or Part2 did you list the original creditor?  Line 4.13 of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
Name and Address Experian PO Box 4500 Allen, TX 75013	On which entry in Part 1 or Part2 did you list the original creditor?  Line 4.13 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
Name and Address First National Collection Bureau Attn: Bankruptcy Dept. 610 Waltham Way Sparks, NV 89434	On which entry in Part 1 or Part2 did you list the original creditor?  Line 4.9 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
Name and Address Miramed Medical Group 991 Oak Creek Dr Lombard, IL 60148	On which entry in Part 1 or Part2 did you list the original creditor?  Line 4.18 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
Name and Address Mutual Management Services Co., LLC 7177 Crimson Ridge Dr., Suite 10 PO Box 8740	On which entry in Part 1 or Part2 did you list the original creditor?  Line 4.22 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Rockford, IL 61126-6235	Last 4 digits of account number
Name and Address Professional Credit Services 2892 Crescent Avenue Eugene, OR 97408	On which entry in Part 1 or Part2 did you list the original creditor?  Line 4.7 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
Name and Address Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108	On which entry in Part 1 or Part2 did you list the original creditor?  Line 4.19 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
Name and Address Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108	On which entry in Part 1 or Part2 did you list the original creditor?  Line 4.8 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number

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Debtor 1 Randy L. Webster		Case number (if know)					
Name and Address Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108	On which entry in Part 1 Line 4.6 of (Check one):	rt 1 or Part2 did you list the original creditor?  Description: □ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account	number					
Name and Address Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108	Line 4.20 of (Check one)	■ Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account	number					
Name and Address TransUnion 555 West Adams Street Chicago, IL 60661	Line 4.13 of (Check one)	■ Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account	numper					

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total claim	
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim	
	6f.	Student loans	6f.	\$	0.00
Total claims	_				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	44,836.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$	44,836.00

		DUGUITIE	III Paue 30 01 30	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Randy L. Webste	r		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
					_
	Number	Street			
					<u>_</u>
	City		State	ZIP Code	
2.2					
	Name				_
					_
	Number	Street			
					_
	City		State	ZIP Code	
2.3					
	Name				_
					_
	Number	Street			
					_
	City		State	ZIP Code	
2.4					
	Name				_
					_
	Number	Street			
					_
	City		State	ZIP Code	
2.5					
	Name				_
	Ni wasia a	04			_
	Number	Street			
				710.0	_
	City		State	ZIP Code	

		Docume	nt Page 31 of 56	
Fill in th	nis information to identify you	r case:		
Debtor 1	Randy L. Webste	ar .		
Dobtoi	First Name	Middle Name	Last Name	—
Debtor 2				
(Spouse if,	, filing) First Name	Middle Name	Last Name	
United S	States Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
_				
Case nu (if known)	imber			☐ Check if this is an
(				amended filing
Offici	al Form 106H			
Sche	edule H: Your Cod	lebtors		12/15
30110		1001010		12/13
eople a ill it out our nar	are filing together, both are eq i, and number the entries in th me and case number (if knowr	ually responsible for supp e boxes on the left. Attach n). Answer every question.	olying correct information. If more sp the Additional Page to this page. O	d accurate as possible. If two married pace is needed, copy the Additional Page, n the top of any Additional Pages, write
1. D	o you have any codebtors? (If	you are filing a joint case, o	do not list either spouse as a codebtor.	
	10			
Y	'es			
Ariz			operty state or territory? (Community erto Rico, Texas, Washington, and Wis	
3. In C in li For	es. Did your spouse, former spo column 1, list all of your codek ine 2 again as a codebtor only	otors. Do not include your	spouse as a codebtor if your spouse tor or cosigner. Make sure you have	e is filing with you. List the person shown listed the creditor on Schedule D (Officia dule D, Schedule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		The creditor to whom you owe the debt
			S.ISSK dill S	
3.1	Christine Webster		□ Cohodi	ulo D. lino
3.1	4125 Florida Drive, Apt. 1	114	☐ Schedu	·
	Rockford, IL 61108			ule E/F, line <u>4.10</u> ule G
				v Acceptance
3.2	Christine Webster		☐ Schedu	ule D, line
	4125 Florida Drive, Apt. 1	14		ule E/F, line <b>4.13</b>
	Rockford, IL 61108			ıle G
			Illinois Co	ommunity Credit Union
3.3	Christine Webster		☐ Schedu	ule D, line
	4125 Florida Drive, Apt. 1	114		ule E/F, line <b>4.24</b>
	Rockford, IL 61108			lle G
			Titan Ren	

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Fill	in this information to identify your	case:								
	otor 1 Randy L. W									
	otor 2									
Uni	ted States Bankruptcy Court for th	e: NORTHERN DISTRI	CT OF ILLINOIS							
	se number nown)		-			□ Ar		ed filing ent showir	ng postpetition	
0	fficial Form 106l					M	M / DD/ \	/YYY	, and the second	
S	chedule I: Your Inc	ome				IVI	IVI / DD/ I			12/15
spo atta	plying correct information. If you use. If you are separated and yo ch a separate sheet to this form.  t 1: Describe Employment  Fill in your employment	ur spouse is not filing w On the top of any addit	rith you, do not incluional pages, write y	ude info	mat	ion about	your sp imber (if	ouse. If m known). /	nore space is Answer ever	needed,
	information.		Debtor 1						iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>				☐ Empl	mployed		
	employers.	Occupation	Security							
	Include part-time, seasonal, or self-employed work.	Employer's name	G4S Secure So	lutions						
	Occupation may include student or homemaker, if it applies.	Employer's address	1395 University Jupiter, FL 334		/ard	l 				
		How long employed t	there? 1 1/2 y	ears			_			
Par	t 2: Give Details About Mo	onthly Income								
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to	report fo	r any	line, write	s \$0 in the	e space. Ir	nclude your no	on-filing
	u or your non-filing spouse have n e space, attach a separate sheet t		combine the information	on for all	emp	loyers for	that pers	on on the	lines below. If	you need
						For Deb	tor 1		btor 2 or ing spouse	
2.	List monthly gross wages, saldeductions). If not paid monthly			2.	\$	3,	410.70	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add I	ine 2 + line 3.		4.	\$	3.41	0.70	\$	N/A	

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Deb	otor 1	Randy L. Webster		Ca	se number ( <i>if k</i>	nown)				
				F	or Debtor 1			Debtor filina s	2 or	
	Cop	by line 4 here	4.	\$	3,41	0.70	\$		N/A	_
5.	List	all payroll deductions:								
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	. \$	85	1.59	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.			0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	. \$		0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d.	. \$		0.00	\$		N/A	_
	5e.	Insurance	5e.	. \$	18	6.51	\$		N/A	_
	5f.	Domestic support obligations	5f.			0.00	\$		N/A	_
	5g.	Union dues	5g.			8.49	\$		N/A	_
	5h.	Other deductions. Specify: Life Insurance	_ 5h.	.+ \$		0.65	+ \$		N/A	_
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,06	7.24	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,34	3.46	\$		N/A	_
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.	. \$		0.00	\$		N/A	<u>.                                     </u>
	8b.	Interest and dividends	8b.	. \$		0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	. \$		0.00	\$		N/A	
	8d.	Unemployment compensation	8d.			0.00	\$		N/A	
	8e.	Social Security	8e.			0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.			0.00	\$		N/A	_
	8g. 8h.	Pension or retirement income Other monthly income. Specify:	8g. 8h.			0.00	, \$		N/A N/A	_
	OH.	Other monthly income. Specify:	_ 011.	.τ ψ		0.00	ΤΨ		IN/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_		0.00	\$		N/A	4
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2,343.46	+ \$		N/A	= \$	2,343.46
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		· —	2,0 .00					_,0 .00
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not ecify:	depe		•		•	chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certailies						12.	\$	2,343.46
13.	Do	you expect an increase or decrease within the year after you file this form	?					·	Combi month	ned ly income
		No.								

Official Form 106I Schedule I: Your Income page 2

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Fill ir	n this informa	ation to identify y	our case:			Ĭ			
Debto	or 1	Randy L. We	ebster			Ch₁	eck if this is: An amended	l filina	
Debto	or 2 use, if filing)						A supplemen	nt showing postpetition c as of the following date	
Unite	d States Bankr	ruptcy Court for the	NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / Y	YYY	
Case (If kno	number								
		orm 106J							
Be a infor	s complete rmation. If m		possible eded, atta	. If two married people a ach another sheet to this					
Part 1.	1: Describe this a join	ribe Your House nt case?	ehold						
	■ No. Go to □ Yes. <b>Doe</b>	o line 2. es Debtor 2 live	·	ate household? ial Form 106J-2, <i>Expense</i> .	s for Separate Hous	sehold of D	ebtor 2.		
2.	Do you have	e dependents?	■ No						
	Do not list D and Debtor 2		☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Depender age	Does depender live with you?	nt —
	Do not state dependents							□ No □ Yes	
	expenses o	penses include f people other t d your depende	han $_{\square}$	No Yes				Lifes	
expe	mate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a sup					
the v		h assistance an		government assistance in a government as a gover			You	ır expenses	
4.		or home owners		ses for your residence. I or lot.	nclude first mortgaç	ge 4.	\$	325.00	
	If not include	ded in line 4:							
	4b. Prope 4c. Home		epair, and i	upkeep expenses		4a. 4b. 4c.	\$	0.00 0.00 50.00	
5.		owner's associa		dominium dues <mark>our residence,</mark> such as ho	me equity loans	4d. 5.		0.00	

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Deb	otor 1	Randy L	. Webster	Case num	ber (if known)	
6.	Utiliti	ies.				
0.	6a.		, heat, natural gas	6a.	\$	100.00
	6b.		wer, garbage collection	6b.	· -	0.00
	6c.		e, cell phone, Internet, satellite, and cable services	6c.		40.00
	6d.	Other. Spe		6d.		0.00
7.			ekeeping supplies	7.	·	400.00
8.			children's education costs	8.	\$	0.00
9.			lry, and dry cleaning	9.	·	100.00
		٠,	products and services	10.	·	75.00
		-	ntal expenses	11.	·	25.00
			Include gas, maintenance, bus or train fare.		<u> </u>	
			ar payments.	12.	\$	250.00
13.			clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
14.			ributions and religious donations	14.	\$	0.00
15.	Insur	rance.	•			
	Do no	ot include in	nsurance deducted from your pay or included in lines 4 or 20.			
	15a.	Life insura	ance	15a.	\$	0.00
	15b.	Health ins	urance	15b.	\$	0.00
	15c.	Vehicle ins	surance	15c.	\$	195.00
	15d.	Other insu	rance. Specify:	15d.	\$	0.00
16.			clude taxes deducted from your pay or included in lines 4 or 20.			
	Spec	·		16.	\$	0.00
17.			ease payments: ents for Vehicle 1	17a.	<b>¢</b>	547.00
			ents for Vehicle 2	17a. 17b.	·	0.00
		Other. Spe	ocify:	17b.	·	
		Other. Spe		17d. 17d.	·	0.00
10			of alimony, maintenance, and support that you did not report a		Φ	0.00
10.			your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I)		\$	0.00
19.			s you make to support others who do not live with you.	·•	\$	0.00
	Spec		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	19.	•	0.00
20.		·	erty expenses not included in lines 4 or 5 of this form or on Sch	hedule I: Y	our Income.	
			s on other property	20a.		0.00
	20b.	Real estat	te taxes	20b.	\$	0.00
	20c.	Property, I	homeowner's, or renter's insurance	20c.	\$	0.00
			nce, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeown	er's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:	Miscellaneous, Birthdays, Holidays, Haircuts	21.	+\$	150.00
		. ,				100.00
22.		•	monthly expenses			
			through 21.		\$	2,307.00
		. ,	2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. /	Add line 22a	a and 22b. The result is your monthly expenses.		\$	2,307.00
23.	Calcu	ulate your i	monthly net income.			
		-	12 (your combined monthly income) from Schedule I.	23a.	\$	2,343.46
			monthly expenses from line 22c above.	23b.	-\$	2,307.00
		1 7 7	, , , , , , , , , , , , , , , , , , , ,			
	23c.		our monthly expenses from your monthly income.	220	e e	36.46
		The result	is your monthly net income.	23c.	\$	30.40
24.	Do vo	ou expect a	an increase or decrease in your expenses within the year after y	ou file this	s form?	
۷٦.			bu expect to finish paying for your car loan within the year or do you expect your			or decrease because of a
			terms of your mortgage?	3-3- F-		
	■ No	0.				
	□ Ye	es.	Explain here:			

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					•	
Fill in this info	rmation to identify your	r case:				
Debtor 1	Randy L. Webste	Randy L. Webster				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States B	ankruptcy Court for the:	NORTHERN DISTRICT OF	FILLINOIS			
Case number (if known)					☐ Check if this is an amended filing	
Official For		an Individual D	ahtor's 9	Schedules	4045	
Deciara	tion About t	an marviadar b	CDIOI 3	Jenedales	12/15	
You must file th obtaining mone	is form whenever you t	in connection with a bankru	r amended sched	lules. Making a false sta	atement, concealing property, or 000, or imprisonment for up to 20	
Sig	ın Below					
Did you pa	ay or agree to pay some	eone who is NOT an attorne	y to help you fill o	out bankruptcy forms?		
■ No						
☐ Yes.	Name of person		. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).			
	alty of perjury, I declare re true and correct.	that I have read the summa	ary and schedules	s filed with this declara	tion and	
X /s/ Rai	ndy L. Webster		Х			
Randy	L. Webster ure of Debtor 1			re of Debtor 2		

Date

Date **February 24, 2016** 

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Fill i	n this information to identify you	ır case:			
Debte					
Debte	First Name	Middle Name	Last Name		
	se if, filing) First Name	Middle Name	Last Name		
Unite	d States Bankruptcy Court for the	NORTHERN DISTRICT C	OF ILLINOIS		
Cooo	numbor				
(if know	number <sub>wn)</sub>				Check if this is an
				a	mended filing
Offi	cial Form 107				
Sta	tement of Financial	Affairs for Individ	luals Filing for B	ankruptcy	12/1
	complete and accurate as poss				
	nation. If more space is needed er (if known). Answer every que		this form. On the top of ar	ny additional pages, write yo	ur name and case
	<u> </u>				
Part	Give Details About Your Ma	arital Status and Where You	I Lived Before		
1. V	What is your current marital stat	us?			
	☐ Married				
I	Not married				
2. [	Ouring the last 3 years, have you	lived anywhere other than	where you live now?		
_	_	,	, , , , , , , , , , , , , , , , , , , ,		
_ L	No No No List all of the places you	lived in the last 2 years. Do n	at include where you live no	.,	
•	Yes. List all of the places you	lived in the last 3 years. Do no	of include where you live no	N.	
	Debtor 1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	Idress:	Dates Debtor 2 lived there
	222 N. Henrietta Avenue	From-To:	☐ Same as Debtor	1	☐ Same as Debtor 1
	Rockford, IL 61101	3/2013 - 3/201	5		From-To:
_					
3. V	Vithin the last 8 years, did you e	vor live with a speuse or le	nal aquivalent in a commu	nity proporty state or territo	w2 (Community proport
	and territories include Arizona, Ca				
	■ No				
•	■ No □ Yes. Make sure you fill out So	hedule H: Your Codebtors (O	fficial Form 106H).		
		(0.			
Part	Explain the Sources of You	ır Income			
4. [	Did you have any income from e	mployment or from operatin	ng a business during this y	ear or the two previous cale	endar years?
F	fill in the total amount of income you	ou received from all jobs and a	all businesses, including par	t-time activities.	•
	you are ming a joint case and you	Thave income that you receive	e together, list it only once u	nder Debtor 1.	
[	□ No				
	Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income	Gross income	Sources of income	Gross income
		Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
From	n January 1 of current year until	□ Wages commissions	\$3,752.00	□ Wagos commissions	
	late you filed for bankruptcy:	☐ Wages, commissions, bonuses, tips	φ3,132.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
				. 5	

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Case number (if known) Debtor 1 Randy L. Webster

			Debtor 1		Debtor 2		
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)	
	r last calei anuary 1 to	ndar year: December 31, 2015 )	■ Wages, commissions, bonuses, tips	\$40,928.41	☐ Wages, combonuses, tips	ımissions,	
			☐ Operating a business		☐ Operating a	business	
		dar year before that: December 31, 2014)	■ Wages, commissions, bonuses, tips	\$22,910.00	☐ Wages, combonuses, tips	ımissions,	
			☐ Operating a business		☐ Operating a	business	
5.	Include in unemploy gambling  List each	come regardless of wher ment, and other public b and lottery winnings. If y	the during this year or the two ther that income is taxable. Ex- penefit payments; pensions; rer you are filing a joint case and you come from each source separa	amples of other income are ntal income; interest; divider ou have income that you rec	alimony; child sup ids; money collecto ceived together, lis	ed from laws	suits; royalties; and
			Debtor 1		Debtor 2		
			Sources of income Describe below	Gross income (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Payments You	u Made Before You Filed for	Bankruptcy			
6.	Are eithe ☐ No.	Neither Debtor 1 nor	2's debts primarily consume Debtor 2 has primarily consuments a personal, family, or househo	umer debts. Consumer deb	ts are defined in 1	U.S.C. § 1	01(8) as "incurred by an
		☐ No. Go to line ☐ Yes List below paid that continclude	fore you filed for bankruptcy, di 7. each creditor to whom you pai creditor. Do not include paymer e payments to an attorney for the int on 4/01/16 and every 3 year	id a total of \$6,225* or more nts for domestic support obli his bankruptcy case.	in one or more pa gations, such as c	yments and hild support	and alimony. Also, do
	■ Yes.		or both have primarily consu		al of \$600 or more	?	
		include pa	7. each creditor to whom you pai yments for domestic support o y for this bankruptcy case.				
	Creditor	's Name and Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this	payment for
	Attn: B	Finance ankruptcy Dept. x 166097 TX 75016-6097	Monthly	\$547.00	\$20,971.00		

☐ Other

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ase number (if known) Debtor 1 Randy L. Webster Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider **Insider's Name and Address** Dates of payment Total amount Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the Date property Explain what happened **Drive Now Acceptance** 2003 Chrysler Town & Country 10/2015 \$1,800.00 777 Dundee Avenue **Dundee, IL 60118** Property was repossessed. ☐ Property was foreclosed. ☐ Property was garnished. ☐ Property was attached, seized or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was **Amount** taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a

court-appointed receiver, a custodian, or another official?

No

☐ Yes

Case 16-80418 Doc 1 Filed 02/24/16 Entered 02/24/16 13:09:59 Desc Main Document Page 40 of 56 Case number (if known) Debtor 1 Randy L. Webster Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Nο Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred or transfer was **Address** payment **Email or website address** made Person Who Made the Payment, if Not You 2/2016 Springer Law Firm \$500.00 \$500.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

2222 E State St, Suite 107 Rockford, IL 61104

Person Who Was Paid

Description and value of any property
transferred

Date payment
or transfer was
payment
made

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Case number (if known) Document

Debtor 1 Randy L. Webster

18.	Within 2 years before you filed for bankruptor transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already  No Yes. Fill in the details.	siness or financial affa de as security (such as t	irs? the granting of a			
	Person Who Received Transfer Address Person's relationship to you	Description and vo			any property or received or debts change	Date transfer was made
	. ,					
19.	Within 10 years before you filed for bankrupte beneficiary? (These are often called asset-protein No		y property to a s	self-settled tru	ust or similar device	of which you are a
	Yes. Fill in the details.					
	Name of trust	Description and v	alue of the prop	erty transferr	ed	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Sto	orage Units		
20.	Within 1 year before you filed for bankruptcy,	, were any financial ac	counts or instru	ments held ir	n your name, or for yo	our benefit, closed,
	sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No				nares in banks, credi	t unions, brokerage
	Yes. Fill in the details.					
		Last 4 digits of account number	Type of accourtinstrument	clo mo	te account was sed, sold, ved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, an	y safe deposi	t box or other deposi	itory for securities,
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St State and ZIP Code)		Describe the	contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within 1	year before yo	ou filed for bankrupto	ey
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe the o	contents	Do you still have it?
	A Company of the December Very Hald are Company (	,				
Par						
23.	Do you hold or control any property that som for someone.	eone else owns? Inclu	ide any property	y you borrowe	ed from, are storing f	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		Describe the	property	Value
Par	t 10: Give Details About Environmental Infor	•				

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5 Case 16-80418 Doc 1 Filed 02/24/16 Entered 02/24/16 13:09:59 Desc Main Page 42 of 56
Case number (if known) Document

Debtor 1 Randy L. Webster

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  Governmental unit Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.		IIdZ	irdous material, polititant, contaminant,	or similar term.			
No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Case Title Case Number  Name Address (Number, Street, City, State and ZIP Code)  Name Address (Number, Street, City, State and ZIP Code)  Name Address (Number, Street, City, State and ZIP Code)  Name Address (Number, Street, City, State and ZIP Code)  Nature of the case Status case  Status case  Status case  Nature of the case Status case and Status case  Nature of the case Status case and Status case	Repo	ort a	I notices, releases, and proceedings that	at you know about, regardless of whe	n th	ey occurred.	
Yes. Fill in the details.   Name of site   Address (Number, Street, City, State and ZIP Code)   No   Yes. Fill in the details.   Court or agency Name   Address (Number, Street, City, State and ZIP Code)   Nature of the case   Status Case   Number   State and ZIP Code)   Nature of the case   Status Case   Number   State and ZIP Code)   Nature of the case   Status Case   Number   State and ZIP Code)   Nature of the following connections to any business   Address (Number, Street, City, State and ZIP Code)   Nature of the following connections to any busines   A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time   A member of a limited liability company (LLC) or limited liability partnership (LLP)   A partner in a partnership   An officer, director, or managing executive of a corporation   No. None of the above applies. Go to Part 12.   Yes. Check all that apply above and fill in the details below for each business   Name of accountant or bookkeeper   Dates business existed   Name   Name   Date   Stude   Name   Date   Name   Name   Name   Name   Date   Name	24.	Has	any governmental unit notified you that	you may be liable or potentially liable	e un	der or in violation of an environme	ental law?
Address (Number, Street, City, State and ZIP Code)  ZP(Code)  ZP(Code)  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Case Title Case Number  Case Number  Case Number  Address (Number, Street, City, Street, City, State and ZIP Code)  Name Address (Number, Street, City, State and ZIP Code)  Name Address (Number, Street, City, State and ZIP Code)  Name Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Partition  A state and ZIP Code)  Partition  A partner in a partnership An officer, director, or managing executive of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Name of accountant or bookkeeper  Name  Describe the nature of the business  Employer Identification number Doates business existed							
No   Yes. Fill in the details.   Name of site   Address (Number, Street, City, State and ZIP Code)   No   Yes. Fill in the details.   Case Title   Case Number   Court or agency   Name   Address (Number, Street, City, State and ZIP Code)   No   A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time   A member of a limited liability company (LLC) or limited liability partnership (LLP)   A partner in a partnership   An officer, director, or managing executive of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   No. None of the above applies. Go to Part 12.   Yes. Check all that apply above and fill in the details below for each business.   Business Name   Address (Number, Street, City, State and ZIP Code)   Describe the nature of the business   Name of accountant or bookkeeper   Describe the nature of the business   Name of accountant or bookkeeper   Describe the statement to anyone about your business? Include all file institutions, creditors, or other parties.   Pate Issued   Date Iss				Address (Number, Street, City, State and	d		Date of notice
Yes. Fill in the details.   Name of site   Address (Number, Street, City, State and ZIP Code)   No   Yes. Fill in the details.   Case Title   Case Number   Case Number   Case Number   Name   Address (Number, Street, City, State and ZIP Code)   Name   Address (Number, Street, City, State and ZIP Code)   Name   Address (Number, Street, City, State and ZIP Code)   Name   Address (Number, Street, City, State and ZIP Code)   Name   Address (Number, Street, City, State and ZIP Code)   Name   Nam	25.	25. Have you notified any governmental unit of any release of hazardous material?					
Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and Know it  No Yes. Fill in the details.  Case Title Case Number  Court or agency Name Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Nature of the case  Status case  Status case  Status and ZIP Code)  Nature of the case  Status case  Status case  Status case  Status case  Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Dates business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about							
No Yes. Fill in the details.  Case Title Case Number  Name Address (Number, Street, City, State and ZIP Code) Amendad Ression or other parties.  Nature of the case  Status case  Nature of the case  Status case  Nature of the case  Status case  Status case  Nature of the case  Status case  Nature of the case  Status case  Nature of the case  Status case  Status case  Nature of the case  Status case  Nature of the case  Status case  Status case  Status case  Nature of the case  Status cas				Address (Number, Street, City, State and	d		Date of notice
Yes. Fill in the details.   Case Title	26.	Hav	e you been a party in any judicial or adm	ninistrative proceeding under any env	iron	mental law? Include settlements a	and orders.
Case Number    Name Address (Number, Street, City, State and ZIP Code)			***				
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business    A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time   A member of a limited liability company (LLC) or limited liability partnership (LLP)   A partner in a partnership   An officer, director, or managing executive of a corporation   An owner of at least 5% of the voting or equity securities of a corporation   No. None of the above applies. Go to Part 12.   Yes. Check all that apply above and fill in the details below for each business.   Business Name				Name Address (Number, Street, City,	Na	ture of the case	Status of the case
□ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time         □ A member of a limited liability company (LLC) or limited liability partnership (LLP)         □ A partner in a partnership         □ An officer, director, or managing executive of a corporation         □ An owner of at least 5% of the voting or equity securities of a corporation         ■ No. None of the above applies. Go to Part 12.         □ Yes. Check all that apply above and fill in the details below for each business.         Business Name Address (Number, Street, City, State and ZIP Code)       Describe the nature of the business Name of accountant or bookkeeper         Name of accountant or bookkeeper       Dates business existed     28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all finantitutions, creditors, or other parties.  No       No         ■ No       Yes. Fill in the details below.         Name       Date Issued	Part	11:	Give Details About Your Business or 0	Connections to Any Business			
□ A member of a limited liability company (LLC) or limited liability partnership (LLP)         □ A partner in a partnership         □ An officer, director, or managing executive of a corporation         □ An owner of at least 5% of the voting or equity securities of a corporation         ■ No. None of the above applies. Go to Part 12.         □ Yes. Check all that apply above and fill in the details below for each business.         Business Name Address (Number, Street, City, State and ZIP Code)       Describe the nature of the business Name of accountant or bookkeeper         Name of accountant or bookkeeper       Dates business existed     28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial year. Possible for the parties.         ■ No       Yes. Fill in the details below.         Name       Date Issued	27.	With	in 4 years before you filed for bankrupto	cy, did you own a business or have a	ny o	f the following connections to any	business?
□ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Address Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fininstitutions, creditors, or other parties.  No □ Yes. Fill in the details below. Name  Date Issued			☐ A sole proprietor or self-employed in	n a trade, profession, or other activity	, eitl	her full-time or part-time	
□ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Employer Identification number Do not include Social Security number of Dates business existed  Employer Identification number Do not include Social Security number of Dates business existed  Employer Identification number Do not include Social Security number of Dates business existed  Name Date Issued			☐ A member of a limited liability comp	any (LLC) or limited liability partnersh	nip (	LLP)	
□ An owner of at least 5% of the voting or equity securities of a corporation  ■ No. None of the above applies. Go to Part 12.  □ Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Employer Identification number Do not include Social Security number of Dates business existed  28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fininstitutions, creditors, or other parties.  ■ No □ Yes. Fill in the details below. Name  Date Issued			☐ A partner in a partnership				
■ No. None of the above applies. Go to Part 12.  □ Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Address existed  28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fininstitutions, creditors, or other parties.  ■ No  □ Yes. Fill in the details below.  Name  Date Issued			☐ An officer, director, or managing exe	ecutive of a corporation			
Yes. Check all that apply above and fill in the details below for each business.  Business Name Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Name of accountant or bookkeeper  Dates business existed  28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fininstitutions, creditors, or other parties.  No Yes. Fill in the details below.  Name  Date Issued			☐ An owner of at least 5% of the voting	g or equity securities of a corporation			
Business Name Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Name of accountant or bookkeeper  Do not include Social Security number of Do not include Social Secu			No. None of the above applies. Go to P	Part 12.			
Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Dates business existed  28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fininstitutions, creditors, or other parties.  No Yes. Fill in the details below.  Name  Date Issued			Yes. Check all that apply above and fill	in the details below for each busines	s.		
Name of accountant or bookkeeper  Dates business existed  28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fininstitutions, creditors, or other parties.  No Yes. Fill in the details below.  Name  Date Issued				Describe the nature of the business			
<ul> <li>28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business?</li> <li>No</li> <li>Yes. Fill in the details below.</li> <li>Date Issued</li> </ul>				Name of accountant or bookkeeper		·	
☐ Yes. Fill in the details below.  Name  Date Issued				cy, did you give a financial statement	to a		ıde all financial
(Number, Street, City, State and ZIP Code)		Add	Iress	Date Issued			

Part 12: Sign Below

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Debtor 1 Randy L. Webster

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Rai	ndy L. Webster	
Randy L. Webster		Signature of Debtor 2
Signati	ure of Debtor 1	
Date	February 24, 2016	Date
Did you ■ No	ı attach additional pa	ges to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
☐ Yes		
Did you	pay or agree to pay	someone who is not an attorney to help you fill out bankruptcy forms?
■ No		
□ Yes.	Name of Person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

# Case 16-80418 Doc 1 Filed 02/24/16 Entered 02/24/16 13:09:59 Desc Main Document Page 44 of 56

Fill in this infor	mation to identify your	case.			
Debtor 1					
Debior	Randy L. Webste	Middle Name	Last Name	<del></del>	
Debtor 2	First Name	Michael No.	LackName		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DIST	FRICT OF ILLINOIS		
Case number					
(if known)				_	Check if this is an
				a	mended filing
Official Fo	rm 108				
Statemer	nt of Intentio	n for Indiv	riduals Filing Under C	hapter 7	12/15
Otatomor	11 01 1111011110	THE TOTAL	Tadale I IIIIg Gilael e	maptor i	12/13
If you are an indi	ividual filing under cha	apter 7, you must fi	I out this form if:		
creditors have	e claims secured by yo	our property, or			
	sed personal property a				
	ever is earlier, unless th		you file your bankruptcy petition or by e time for cause. You must also send c		
on the	IOIIII				
	eople are filing togethend date the form.	r in a joint case, bo	oth are equally responsible for supplying	g correct information.	Both debtors must
Be as complete a	and accurate as possib	ole. If more space is	s needed, attach a separate sheet to this	s form. On the top of a	ny additional pages,
	our name and case nu				,
Part 1: List Yo	our Creditors Who Hav	e Secured Claims			
1. For any credite information be		art 1 of Schedule D	: Creditors Who Have Claims Secured I	by Property (Official Fo	orm 106D), fill in the
	editor and the property t	that is collateral	What do you intend to do with the prosecures a debt?		ou claim the property empt on Schedule C?
Creditor's E	xeter Finance		☐ Surrender the property.	□ No	
name:			Retain the property and redeem it.	=	
Description of	2015 Kia Forte 6,0	00 miles	Retain the property and enter into a	■ Yes	3
property	,		Reaffirmation Agreement.  Retain the property and [explain]:		
securing debt:					
				·	
	our Unexpired Persona		in Schedule G: Executory Contracts an	d Unexnired Leases (C	Official Form 106G) fill
in the informatio	n below. Do not list re	al estate leases. Ur	expired leases are leases that are still i	n effect; the lease peri	iod has not yet ended.
You may assume	e an unexpired persona	al property lease if	the trustee does not assume it. 11 U.S.C	C. § 365(p)(2).	
Describe your u	nexpired personal pro	perty leases		Will the lea	ase be assumed?
Lessor's name: Description of lea	hase			☐ No	
Property:	2004			☐ Yes	
Lessor's name:	anad			□ No	
Description of lease Property:	aseu			☐ Yes	
. ,				<b>—</b> 163	
Lessor's name:				□ No	

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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B8 (Form 8) (12/08)		Page 2
	cription of leased perty:	☐ Yes
	sor's name:	□ No
	cription of leased perty:	☐ Yes
	sor's name:	□ No
	cription of leased perty:	☐ Yes
	sor's name:	□ No
	cription of leased perty:	☐ Yes
	sor's name:	□ No
	cription of leased perty:	☐ Yes
Part	3: Sign Below	
	er penalty of perjury, I declare that I have indicated erty that is subject to an unexpired lease.	my intention about any property of my estate that secures a debt and any personal
X	/s/ Randy L. Webster	X
	Randy L. Webster Signature of Debtor 1	Signature of Debtor 2
	Signature of Debior 1	
	Date <b>February 24, 2016</b>	Date

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations:

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-80418 Doc 1 Filed 02/24/16 Entered 02/24/16 13:09:59 Desc Main Document Page 50 of 56

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Northern District of Illinois

In re	Randy L. Webster		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMP	ENSATION OF ATTOR	NEY FOR DE	CBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fibe rendered on behalf of the debtor(s) in contemplatio	ling of the petition in bankruptcy,	or agreed to be paid	to me, for services re	
	For legal services, I have agreed to accept		\$	500.00	
	Prior to the filing of this statement I have receive			500.00	
				0.00	
2. ′	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed con	mpensation with any other person u	inless they are mem	pers and associates of	my law firm.
	☐ I have agreed to share the above-disclosed competed copy of the agreement, together with a list of the r				aw firm. A
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects	of the bankruptcy c	ase, including:	
1	<ul> <li>a. Analysis of the debtor's financial situation, and ren</li> <li>b. Preparation and filing of any petition, schedules, sc</li> <li>c. Representation of the debtor at the meeting of cred</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and applicate 522(f)(2)(A) for avoidance of liens on head</li> </ul>	tatement of affairs and plan which a litors and confirmation hearing, and preduce to market value; exe tions as needed; preparation	may be required; d any adjourned hea mption planning	rings thereof;	filing of
<b>6.</b>	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any cany other adversary proceeding.			es, relief from stay	y actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of a pankruptcy proceeding.	any agreement or arrangement for p	payment to me for re	presentation of the do	ebtor(s) in
F	ebruary 24, 2016	/s/ Daniel A. Sprin			
D	Pate (	Daniel A. Springer Signature of Attorney			
		Springer Law Firm			
		2222 E State St			
		Suite 107 Rockford, IL 6110	4		
		815.312.4725	•		
		dspringerlaw@gm	nail.com		
		Name of law firm			

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Springer Law Firm

2222 East State St. # A-104A, Rockford, IL

815.312.4275

### **CHAPTER 7 RETAINER AGREEMENT**

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- 1. The attorney fees for the Chapter 7 bankruptcy are \$500. This is a flat fee arrangement, and does not include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold.

  Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement. This includes adversary proceedings that may fall under the bankruptcy case. This agreement does not include representation in such adversary proceedings.
- 7. I understand that all money paid towards attorney fees is non-refundable. I understand that once I pay Springer Law, that Springer Law begins work on my case. I understand that the majority of bankruptcy work is done prior to the filing of the case, and because of this the fees are earned even before the filing of the case.
- 8. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 9. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.

10. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dated: 2/19/16	
Signature: Rengly Milh Stars	Attorney Signature: MM
Print Name: Rendy WebSHC	Attorney Print: Michael Bless and

### **United States Bankruptcy Court** Northern District of Illinois

In re	Randy L. Webster		Case No.	
		Debtor(s)	Chapter 7	
	VE	RIFICATION OF CREDITOR M	<b>IATRIX</b>	
		Number of Creditors: 39		
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	tors is true and correct to t	the best of my
Date:	February 24, 2016	/s/ Randy L. Webster Randy L. Webster Signature of Debtor		

Accounts Receivable Management Attn: Bankruptcy Dept. 7834 N 2nd St. Unit 5 Machesney Park, IL 61115

AT&T PO Box 6416 Carol Stream, IL 60197

At&T Wireless Attn: Bankruptcy Dept. 7900 Xerxes Ave, S Ste 301 Minneapolis, MN 55431

Blue Cross Blue Shield of Illinois 300 East Randolph Street Chicago, IL 60601

Chase 8 Auto Sales Attn: Bankruptcy Dept. 1711 Broadway Rockford, IL 61104

Check 'n Go Attn: Bankruptcy Dept. 160 N Mulford Rd. Rockford, IL 61108

Christine Webster 4125 Florida Drive, Apt. 114 Rockford, IL 61108

City of Rockford EAS Ambulance Svc. 204 S. 1st Street Rockford, IL 61104

Commonwealth Financial Attn: Bankruptcy Dept. 245 Main St. Scranton, PA 18519

Consumer Cellular 7204 SW Durham Rd Portland, OR 97224

Credit Collection Services Attn: Bankruptcy Dept. PO Box 9134 Needham Heights, MA 02494

Crusader Clinic Attn: Bankruptcy Dept. 1200 W. State St. Rockford, IL 61102

DirecTV Attn: Bankruptcy Dept. PO Box 6550 Englewood, CO 80155-6550

Drive Now Acceptance 777 Dundee Avenue Dundee, IL 60118

Enhanced Recovery Company Attn: Bankruptcy Dept. PO Box 57547 Jacksonville, FL 32241

Equifax PO Box 740256 Atlanta, GA 30374

Exeter Finance Attn: Bankruptcy Dept. PO Box 166097 Irving, TX 75016-6097

Experian PO Box 4500 Allen, TX 75013

Figis
3200 S Central Ave.
Marshfield, WI 54449

First National Collection Bureau Attn: Bankruptcy Dept. 610 Waltham Way Sparks, NV 89434

GEICO Attn: Bankruptcy Dept. PO Box 9105 Macon, GA 31208-9105

Illinois Community Credit Union Attn: Bankruptcy Dept. 508 W State St. Sycamore, IL 60178

Infinity Healthcare Physicians Attn: Bankruptcy Dept. 111 E Wisconsin Ave. Suite 2000 Milwaukee, WI 53202

LTD Commodities PO Box 740 Deerfield, IL 60015

Miramed Medical Group 991 Oak Creek Dr Lombard, IL 60148

Mutual Management Services Co., LLC 7177 Crimson Ridge Dr., Suite 10 PO Box 8740 Rockford, IL 61126-6235

Nationwide Insurance One Nationwide Plaza Columbus, OH 43215

Nicor Gas P.O. Box 190 Aurora, IL 60507

Professional Credit Services 2892 Crescent Avenue Eugene, OR 97408

Rockford Health Physicians Attn: Bankruptcy Dept. 2300 N Rockton Ave. Rockford, IL 61103 Rockford Health System Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103

Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108

Rockford Radiology Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103

Sprint KSOPHT0101-Z4300 6391 Sprint Parkway Overland Park, KS 66251

Swedish American Health System Attn: Bankruptcy Dept. 1401 East State Street Rockford, IL 61104

T-Mobile Bankruptcy Team PO Box 53410 Bellevue, WA 98015-3410

Titan Rentals 818 Main Street Lafayette, IN 47901

TransUnion 555 West Adams Street Chicago, IL 60661

University of Phoenix 1625 W. Fountainhead Pkwy Tempe, AZ 85282-2371